Texas law if it were written by legislative counsel here in the House of Representatives.

And they took the bill and did a back-of-the-envelope score and came up with a \$3.8 billion savings over 5 years that would be available to the budgeteers had they chosen to accept that. In other words, do medical liability reform like we did in Texas across the country, and you are going to save some money.

It is not a huge amount of money. I know in Washington-speak \$3.8 billion doesn't resonate like some other figures, but it is real money and it is available to us. All we have to do is enact some type of sensible medical liability reform across the country like we did in my home State of Texas.

So I took that language that ran through legislative counsel on the Texas liability law and actually introduced the Texas medical liability law. It is H.R. 3509, the Medical Justice Act of 2007. It is now available. Members may cosponsor it. I recognize in the current climate in the United States House of Representatives it is going to be very difficult to get any type of medical liability reform passed, but at the same time, this is important work and we shouldn't shy away from it. We should at least have the discussion and the debate. Let's clash in the marketplace of ideas here. Here is a system in Texas that is delivering real value to the patients of Texas and to the doctors of Texas.

Mr. Speaker, we can't rise to the transformational challenge that stretches before us without keeping the best doctors involved and recruiting and training the best and brightest doctors who are coming behind them, recruiting and training those doctors for tomorrow. This is going to require a near-term, a mid-term and a longterm strategy. Mr. Speaker, we have to work together, both sides of the aisle. This is not a partisan issue. This is going to face every single one of us in our district as we go through this next several years. And we are not going to be able to master the transformational challenge that extends ahead of us without America's best and brightest staying involved and providing care for patients in this country. The best and brightest men and women of medicine, we need to keep them on the front lines. I stress, this is a true bipartisan issue. There is not a single party label attached to this concept.

So let's sit down, both sides of the aisle, and work together to insure a healthy future for all Americans. The bottom line is we have to make certain that doctors are continuing to practice, they are satisfied with their compensation and satisfied with their ability to deliver services to the patients.

You hear the phrase in Washington, "well, we will cross that bridge when we come to it"; in other words, we won't act until we absolutely have to act.

Mr. Speaker, this is a transformational time. I think this calls for a different type of thinking. We are going to have to build a bridge while we are crossing it, not wait until we get there. We are going to have to build that bridge ahead of time, and I think we can.

I visited a group of scientists at the National Institutes of Health and they talked about the challenge of working through the genetic sequence of the human genome and sequencing the base pairs in the human genome. And they started this project in the 1990s, a very labor-intensive project, and they didn't have the Internet. They didn't know that they needed the Internet. Fortunately, the Internet came along while they were in the process of cracking the genetic code. But if it hadn't been the Internet, they wouldn't have been able to share information with other scientists around the world on a real-time basis. And I don't know if by today we would have cracked the genetic code, so an example of building the bridge while you are crossing, and certainly those scientists at the National Institutes of Health really did take that to health.

Why wait any longer? Why should we keep doctors and patients waiting? Sensible legislation is before us now. Again, I repeat, I urge my colleagues to look at this, talk to me if you have questions about it. It is extremely important for those students who are looking to go into health care as a profession, those in medical school now, those doctors in residency, and again, what I would refer to as the mature physician. It is important to the whole continuum of the timeline of the physician workforce.

We don't want to end up in that day that Alan Greenspan looked into the future and saw a couple of years ago. We don't want to arrive at that day where there is no one there to take care of America's seniors because we didn't pay attention, we took our eye off the ball back here in the year 2007.

LEAVE OF ABSENCE

By unanimous consent, leave of absence was granted to:

Mr. DAVIS of Illinois (at the request of Mr. HOYER) for today on account of official business in the district.

Ms. EDDIE BERNICE JOHNSON of Texas (at the request of Mr. HOYER) for today and October 23 on account of a death in the family.

Mr. KIND (at the request of Mr. HOYER) for today.

Mr. WILSON of Ohio (at the request of Mr. HOYER) for today and the balance of the week on account of medical reasons.

Mr. YARMUTH (at the request of Mr. HOYER) for today.

Mr. GINGREY (at the request of Mr. BOEHNER) for today on account of flight delays.

Mr. Young of Florida (at the request of Mr. BOEHNER) for today on account of illness in the family.

SPECIAL ORDERS GRANTED

By unanimous consent, permission to address the House, following the legislative program and any special orders heretofore entered, was granted to:

(The following Members (at the request of Ms. Woolsey) to revise and extend their remarks and include extraneous material:)

Mr. CUMMINGS, for 5 minutes, today.

Ms. Woolsey, for 5 minutes, today.

Mr. DEFAZIO, for 5 minutes, today. Ms. WATERS, for 5 minutes, today.

(The following Members (at the request of Mr. Jones of North Carolina) to revise and extend their remarks and include extraneous material:)

Mr. Burton of Indiana, for 5 minutes, today and October 23, 24, and 25.

Mr. Poe, for 5 minutes, October 29.

Mr. ENGLISH of Pennsylvania, for 5 minutes, October 24.

Mr. Jones of North Carolina, for 5 minutes, October 29.

SENATE BILLS REFERRED

Bills of the Senate of the following titles were taken from the Speaker's table and, under the rule, referred as follows:

S. 2206. An act to provide technical corrections to Public Law 109–116 (2 U.S.C. 2131a note) to extend the time period for the Joint Committee on the Library to enter into an agreement to obtain a statue of Rosa Parks, and for other purposes; to the Committee on House Administration.

S. Con. Res. 51. Concurrent resolution supporting "Lights On Afterschool!", a national celebration of after school programs; to the Committee on Education and Labor.

ADJOURNMENT

Mr. BURGESS. Mr. Speaker, I move that the House do now adjourn.

The motion was agreed to; accordingly (at 10 o'clock and 43 minutes p.m.), under its previous order, the House adjourned until tomorrow, Tuesday, October 23, 2007, at 9 a.m., for morning-hour debate.

EXPENDITURE REPORTS CONCERNING OFFICIAL FOREIGN TRAVEL

Reports concerning the foreign currencies and U.S. dollars utilized for speaker-authorized official travel during the second and third quarters of 2007, pursuant to Public Law 95–384 are as follows: